Name, Address, Telephone No. & I.D. No.		1
UNITED STATES BANKRUPTO	Y COURT	
SOUTHERN DISTRICT OF CALIFO 325 West "F" Street, San Diego, Califo		
In Re		
		BANKRUPTCY NO.
	Debtor.	
APPLICATIO	ON TO PAY FILING FEES	IN INSTALLMENTS
		n is made for permission to pay half the filing fee at the time the vithin 30 days of the date my petition is filed (check one):
[] Chapter 7 payment of \$104.50 [] Chapter 11 payment of \$419.50		er 13 payment of <u>\$97.00</u> er 12 payment of <u>\$119.50</u>
I certify that I am unable to pay the filing	fee except in installments.	
		an attorney or any other person for services in connection with ayment nor transfer any property for services in connection with
I understand that entry of my discharge [or co will be dismissed without further notice.	onfirmation of any plan] will be de	elayed until the filing fee is paid in full or, if not paid, that my case
Dated:		
	•	
If this document is prepared by a NON-ATTORNEY BANKRUPTCY	Applicant	
PETITION PREPARER, certification		
printed on page 2 must be completed.	Signed: Joint Applicant	
	Joint Applicant	
DECLARATION BY A	TTORNEY CONCERNING	PAYMENT OF FILING FEES
I have not been paid any money nor accepte paid in full.	d any transfer of property as pay	ment for my services and will not do so until the fees have beer
I have made the Applicant(s) aware that t	the case will be dismissed if the	e fee is not paid when due.
Dated:		
		
	Attornov for Do	htor(s)

Form of payment: Please do not mail cash. Money orders or certified checks only; personal checks of the debtor will not be accepted.

CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER

(See 11 U.S.C. § 110)

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this Application to Pay Filing Fees in Installments. I also certify that I will not accept money or any other property from the debtor before the filing fee is paid in full.

Printed or Typed Name of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. §110(c).)
Firm Name, if any	
(Address)	
(Addiess)	
(City, State, ZIP Code)	
Names and Social Security numbers of all other individuals wh	o prepared or assisted in preparing this document:
If more than one person prepared this document, attach additional si	gned sheets conforming to the appropriate Official Form for each person
Signature of Bankruptcy Petition Preparer	Date

A bankruptcy petition preparer's failure to comply with the provisions of Title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.